



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05)
Indiana Election Commission (IC 3-9-5-14)

(CFA-4)
Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

INSTRUCTIONS: Please type or print legibly **IN BLACK INK** all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? ☐ Yes ☒ No

COMMITTEE INFORMATION

| | |
|--|---|
| 1. Full Name of Committee (as on Statement of Organization) <input type="checkbox"/> Check if this is a new name <i>Committee to Re-Elect Charlotte Scott</i> | |
| 2. Acronym or Abbreviated Name (if any) | 3. Committee Telephone Number <i>(317) 293-0368</i> |
| 4. Mailing Address (address where all campaign finance correspondence is received) <input type="checkbox"/> Check if this is a new address <i>6624 Eagles Wing Dr</i> | |
| 5. City, State, ZIP Code <i>INDIANAPOLIS, IN 46214</i> | 6. Party Affiliation (if applicable) <i>Democratic</i> |

CANDIDATE INFORMATION (For Candidate's Committees Only)

| | |
|--|---|
| 7. Full Name of Candidate (include any nickname) <i>Charlotte Marie Scott</i> | 8. Party Affiliation or If Independent Candidate <i>Democratic</i> |
| 9. Office Sought (Include district number, if any. Not required for exploratory committee.) <i>Wayne Township Dist 2 Advisory Board</i> | 10. County of Residence <i>Marietta</i> |

TYPE OF REPORT

| | |
|---|---|
| 11. Check one: <input checked="" type="checkbox"/> Pre-Primary <input type="checkbox"/> Pre-Election <input type="checkbox"/> Annual <input type="checkbox"/> Nomination <input type="checkbox"/> Other <input type="checkbox"/> Final/Disbands Committee (lines 18, 19, and 20 must be "0") <input type="checkbox"/> Outgoing Treasurer (within 10 days amend Statement of Organization) | CONVENTION CANDIDATES ONLY Check one: <input type="checkbox"/> Pre-Convention <input type="checkbox"/> Post-Convention |
|---|---|

| | | |
|--|-------------------------|--------------------------|
| 12. Reporting Period: From: <i>January 26, 2016</i> Through: <i>April 8, 2016</i> | COLUMN A This Period | COLUMN B Year to Date |
| 13. Cash on hand and investments at the beginning of this reporting period. | <i>0</i> | <i>0</i> |
| 14. Cash on hand and investments January 1, current year. | | <i>0</i> |

CONTRIBUTIONS AND RECEIPTS

| | | |
|---|----------|----------|
| (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) | | |
| 15a. Itemized (use Schedule A) | | |
| 15b. Unitemized | | |
| 15c. Add lines 15a and 15b in both columns | SUBTOTAL | |
| 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B | TOTAL | <i>0</i> |

EXPENDITURES

| | | |
|---|----------|----------|
| (Note: These amounts include in-kind expenditures and loan repayments.) | | |
| 17a. Itemized (use Schedule B) (Public Question: use Schedule C) | | |
| 17b. Unitemized | | |
| 17c. Add lines 17a and 17b in both columns | SUBTOTAL | <i>0</i> |
| 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) | TOTAL | <i>0</i> |
| 19. Debts OWED BY the committee (use Schedule D) | | |
| 20. Debts OWED TO the committee (use Schedule E) | | |

CERTIFICATION

| | | |
|---|---------------------------|------------------------|
| I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE, CORRECT AND COMPLETE. | | |
| Signature of Treasurer <i>Charlotte Scott</i> | Title <i>Treasurer</i> | Date <i>2-19-16</i> |
| Signature of Candidate (if applicable) <i>Charlotte Scott</i> | | Date <i>2-19-16</i> |

FOR OFFICE USE ONLY
FILED

FEB 19 2016

A. Eldridge

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor. (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)